10

U.S Department of Justice United States Marshals Service

PROCESS RECEIPT AND RETURN

FRUCESS.	KECELFICALLD KETUKI
See "Instructions for	or "Service of Process by the U.S. Marshal"
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has a triby and the contract of	FILED

PLAINTIFF				o nu 11	PW 10: 02	201	SOURT CASE NUMBER	
United States	of America		20	19 JUL 11	4M 10: U3	V	3:18-CR-416-M 2: 05	
DEFENDANT ROBERT	Γ CARL LEC	MARD II	D			DEPUTY	TYPE OF PROCESS	
RODERI				ATION ETC. TO	O SERVE OR DESCE	*	Fund Order of Forfeiture PROPERTY TO SEIZE OR COND	
SERVE AT		50 in funds	s from acco	ount 48800?			of Force Multiplier So	
	ADDRESS (Street of	or RFD, Apartment	No., City, State and	ZIP Code)				
SEND NOTICE OF	SERVICE COPY TO	REQUESTER AT I	NAME AND ADDR	ESS BELOW				
Mark J. Tindall Assistant United States Attorney 1100 Commerce Street; Suite 300 Dallas, Texas 75242					Number of process to be served with this Form - 285	1		
							Number of parties to be served in this case	
							Check for service on U.S.A.	
	JCTIONS OR OTHI				DITING SERVER es Available For Serve	<u>-</u>		
Pursuant to th	he Final Order	-					property according to law.	
Asset ID: 17-	-FB1-004246							
	ey or other Originator	requesting service o	on behalf of:		M PLAINTIFF		TELEPHONE NUMBER	DATE
Signature of Attorne		, -			M PLAINTIFF		TELEPHONE NUMBER (214) 659-8600	DATE 07/11/19
Signature of Attorne	y or other Originator	y A. Jacque	2 y	THIS LINE				
Signature of Attorne	ey or other Originator Tindall by R USE OF U.S. MARSE eipt for the total	y A. Jacque	2 y	THIS LINE District to Serve		d USMS Deputy	(214) 659-8600	
Signature of Attorne /S/ Mark J. SPACE BELOW FOR I acknowledge rece	ey or other Originator Tindall b R USE OF U.S. MARSE eipt for the total indicated. M 285 if more	y A. Jacque	OT WRITE BELOW	District	□ DEFENDANT		(214) 659-8600	07/11/19
Signature of Attorne /S/ Mark J. SPACE BELOW FOR I acknowledge rece number of process (Sign only first USI than one USM 285) I hereby certify a	ey or other Originator Tindall b R USE OF U.S. MARSH eipt for the total indicated. M 285 if more is submitted) and return that I	A. Jacque HAL ONLY - DO NO Total Process	DIT WRITE BELOW District of Origin No	District to Serve	Signature of Authorize	udl xecuted as sh	(214) 659-8600	07/11/19 Date
Signature of Attorne /S/ Mark J. SPACE BELOW FOR I acknowledge recenumber of process (Sign only first USI than one USM 285 I hereby certify and the individua	ey or other Originator Tindall by R USE OF U.S. MARSH eipt for the total indicated. M 285 if more is submitted) and return that I	IAL ONLY - DO NO Total Process I have personall ration, etc., at t	DI WRITE BELOW District of Origin No ly served, □ have the address show	District to Serve No ve legal evidence on above or on the	Signature of Authorize	ecuted as sh	or Clerk Own in "Remarks", the process don, etc., shown at the address inse	Date escribed ried below.
Signature of Attorne /S/ Mark J. SPACE BELOW FOR I acknowledge recenumber of process (Sign only first USs than one USM 285) I hereby certify a on the individual I hereby certiff Name and title of its	ey or other Originator Tindall b R USE OF U.S. MARSE eipt for the total indicated. M 285 if more is submitted) and return that I 1, company, corpo fy and return that	IAL ONLY - DO NO Total Process I have personall ration, etc., at the state of the shown above)	DI WRITE BELOW District of Origin No ly served, □ have the address show	District to Serve No ve legal evidence on above or on the	Signature of Authorize Jaul of service Shave ee individual, compan	ecuted as sh	or Clerk own in "Remarks", the process of the control of the cont	Date escribed red below. scretion then ce of abode. Time am pm
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Signature of Attorne /S/ Mark J. SPACE BELOW FOR I acknowledge rece number of process (Sign only first US; than one USM 285 I hereby certify a on the individua I hereby certify Address (complete Service Fee	R USE OF U.S. MARSH eipt for the total indicated. M 285 if more is submitted) and return that I [1, company, corporty and return that individual served (if only if different than I for the individual served (if only if only if different than I for the individual served (if only if o	IAL ONLY - DO NO Total Process I have personall ration, etc., at the shown above) a shown above) arges arges arges arges	DI WRITE BELOW District of Origin No ly served, have the address show the address show ocate the individual of the property of th	No	of service. A frave e individual, comparorporation, etc., name	ed above (Se	or Clerk own in "Remarks", the process of the control of the cont	Date Date Date Described rescribed red below. Scretion then use of abode. Time